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Patent Agent Specialist

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MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

09/509753

CLAIMS

AS FILED	AFTER		AFTER		
	1st AMENDMENT	2nd AMENDMENT	1st AMENDMENT	2nd AMENDMENT	
IND.	DEP.	IND.	DEP.	IND.	DEP.
1		1		1	
2		1		1	
3		1		1	
4		1		1	
5		1		1	
6		1		1	
7		1		1	
8		1		1	
9		1		1	
10		1		1	
11		1		1	
12		1		1	
13		1		1	
14		1		1	
15		1		1	
16		1		1	
17		1		1	
18		1		1	
19		1		1	
20		1		1	
21		1		1	
22		1		1	
23		1		1	
24		1		1	
25		1		1	
26		1		1	
27		1		1	
28		1		1	
29		1		1	
30		1		1	
31		1		1	
32		1		1	
33		1		1	
34		1		1	
35		1		1	
36		1		1	
37		1		1	
38		1		1	
39		1		1	
40		1		1	
41		1		1	
42		1		1	
43		1		1	
44		1		1	
45		1		1	
46		1		1	
47		1		1	
48		1		1	
49		1		1	
50		1		1	
TOTAL IND.	1	2	3	4	5
TOTAL DEP.	4	5	6	7	8
TOTAL CLAIMS	10	18	26	34	42

PTO-1360 (5-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT OF COMMERCE

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